STATE OF CALIFORNIA THE RESOURCES AGENCY DEPARTMENT OF CONSERVATION INFORMATION UPDATE

Your help is needed to update our files. Please complete this form and return to us with your next Fee Report.

List the Contact Person, **phone number**, **fax number**, **e-mail address**, and **mailing address** for your city/county. List the address in which information letters and correspondence is to be sent.

City/county of:	Mailing Address (include zip code)
Phone # ()	
Fax # ()	
e-mail	
Contact Person:	Position:
Other jurisdictions you report for:	
City of	-
City of	additional pages.
City of	
If other persons in other offices are inverse Report (s), list their names, titles, and p	olved in compiling the information for your Fee phone number.
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Please return this form to:

Department of Conservation 801 K Street, MS 22-15 Sacramento, CA 95814-3531

Joyce Catching Phone # (916) 323-8190